

Mod. 3 Vital Signs

- 1. What is most important to assess during secondary assessment?**
 - a. Airway
 - b. Pulse
 - c. Respiration
 - d. Chief complaint
- 2. The first set of vital sign measurements obtained are often referred to as which of the following?**
 - a. Baseline vital signs
 - b. Normal vital signs
 - c. Standard vital signs
 - d. None of the above
- 3. A patient with a pulse rate of 120 beats per minute is considered which of the following?**
 - a. Dyscardic
 - b. Normocardic
 - c. Tachycardic
 - d. Bradycardic
- 4. Where do baseline vital signs fit into the sequence of patient assessment?**
 - a. Ongoing assessment
 - b. At primary assessment
 - c. At secondary assessment
 - d. At the patient's side
- 5. In a conscious adult patient, which of the following pulses should be assessed initially?**
 - a. Brachial
 - b. Radial
 - c. Carotid
 - d. Pedal
- 6. You are assessing a 55-year-old male complaining of chest pain and have determined that his radial pulse is barely palpable. You also determine that there were 20 pulsations over a span of 30 seconds. Based on this, how would you report this patient's pulse?**
 - a. Pulse 20, weak, and regular
 - b. Pulse 20 and weak
 - c. Pulse 40 and weak
 - d. Pulse 40, weak, and irregular
- 7. Which of the following are the vital signs that need to be recorded?**
 - a. Pulse, respiration, skin color, skin temperature and condition
 - b. Pulse, respiration, skin color, skin temperature and condition, pupils, blood pressure, and bowel sounds
 - c. Pulse, respiration, skin color, skin temperature and condition, pupils, and blood pressure
 - d. Pulse, respiration, skin color, skin temperature, pupils, and blood pressure
- 8. Which of the following is a normal respiratory rate for an adult at rest?**
 - a. 12 breaths per minute
 - b. 10 breaths per minute
 - c. 24 breaths per minute
 - d. 22 breaths per minute
- 9. Slight movement of the chest during respiration is usually indicative of which of the following?**
 - a. Labored breathing
 - b. Normal breathing
 - c. Noisy breathing
 - d. Shallow breathing

Mod. 3 Vital Signs

10. **The increase in the work of breathing is reported as:**
 - a. labored breathing.
 - b. troubled breathing.
 - c. nosey breathing.
 - d. obstructed breathing.

11. **Breathing sounds that should concern the EMT are:**
 - a. snoring, gurgling, wheezing, crowing, and crowning.
 - b. retractions, diaphragmatic breathing.
 - c. tachycardia, retractions, diaphragmatic breathing.
 - d. snoring, gurgling, wheezing, and crowing.

12. **You are called to care for a child who has fallen out of a third-story window. You arrive to find the child in his mother's arms. As you approach, you notice the child's skin is pale with dark spots of cyanosis. You would report this uncommon condition of blotchy skin as:**
 - a. mottled.
 - b. flushed.
 - c. jaundiced.
 - d. cyanotic.

13. **The term *cyanosis* is used when the patient's skin color is noted to be which of the following characteristics?**
 - a. Yellow
 - b. Blue-gray
 - c. Very pale
 - d. Flushed

14. **Which of the following is the BEST way to assess a patient's skin temperature?**
 - a. Place your cheek against the patient's forehead.
 - b. Place the back of your hand against the patient's forehead.
 - c. Place your cheek against the patient's abdomen.
 - d. Place the back of your hand against the patient's abdomen.

15. **A(n) _____ set of vital signs is important for critical decision making for the EMT.**
 - a. unbiased
 - b. accurate
 - c. complete
 - d. repeated

16. **If capillary refill is assessed in a child patient, how long should it take the normal pink color to return to the nail bed?**
 - a. 2 seconds
 - b. 4 seconds
 - c. 3 seconds
 - d. 5 seconds

17. **You are assessing a 48-year-old male who is unconscious. The scene is safe and you hear the patient gurgling. What is your next action?**
 - a. Suction the airway.
 - b. Insert an airway adjunct.
 - c. Open the airway with a head tilt.
 - d. Quickly check the pulse.

Mod. 3 Vital Signs

18. **Why is the skin temperature such an important vital sign?**
 - a. It can provide information about the patient's ability to maintain normal body temperature.
 - b. It can provide reportable information about the patient's level of consciousness, a drop in oxygen, and if the blood vessels in the brain constrict, which could indicate a life-threatening problem.
 - c. It can provide reportable information about the patient's breathing, a drop in oxygen, and if the blood vessels in the skin constrict, which could indicate a life-threatening problem.
 - d. It can provide valuable information about the patient's circulation, a drop in perfusion, and if the blood vessels in the skin constrict, which could indicate a life-threatening problem.

19. **When the EMT checks the pupils he or she is checking for what three things?**
 - a. Movement, gaze, and equality
 - b. Color, equality, and reactivity
 - c. Reactivity, gaze, and equality
 - d. Size, equality, and reactivity

20. **What is the normal response of the pupils when exposed to bright light?**
 - a. Fluttering
 - b. Dilation
 - c. Constriction
 - d. No effect

21. **When pupils are dilated they are:**
 - a. elliptical or elongated in shape.
 - b. smaller than normal.
 - c. larger than normal.
 - d. irregularly shaped.

22. **When the heart contracts and forces blood into the arteries, the pressure created is known as the:**
 - a. pulse pressure.
 - b. systolic blood pressure.
 - c. diastolic blood pressure.
 - d. central venous pressure.

23. **What is the pressure remaining in the arteries after the pulse wave has passed through?**
 - a. Venous pressure
 - b. Systolic blood pressure
 - c. Diastolic blood pressure
 - d. Resting blood pressure

24. **Which of the following BEST describes the proper placement of the blood pressure cuff?**
 - a. Covering two-thirds of the upper arm
 - b. Midway between the elbow and shoulder
 - c. One inch below the armpit
 - d. Covering the patient's elbow

25. **What category would include a patient with a blood pressure of 134/84 mmHg?**
 - a. Hypotension
 - b. Normotension
 - c. Hypertension
 - d. Prehypertension

26. **A patient being transported by ambulance to the hospital can have his blood pressure measured by which of the following methods?**
 - a. Blood pressure monitor
 - b. Palpation
 - c. Auscultation
 - d. Any of the above

Mod. 3 Vital Signs

27. **The method of taking blood pressure by using a stethoscope to listen to the characteristic sounds produced is called:**
- auscultation.
 - articulation.
 - palpation.
 - pulsation.
28. **In a blood pressure reading of 120/80, the 120 is measuring what body process?**
- Diastolic blood pressure; when the left ventricles contract and the blood is forced into the arteries
 - Systolic blood pressure; when the right ventricles contract and the blood is forced into the veins
 - Systolic blood pressure; when the left ventricles contract and the blood is forced into the arteries
 - Systolic blood pressure; when the left ventricles contract and the blood is forced into the veins
29. **You are called to a 72-year-old patient with weakness and headache with an initial blood pressure of 140/92. His repeat blood pressure at 5 minutes is unchanged. His condition is called:**
- stroke.
 - prehypertension.
 - hypertension.
 - hypotension.
30. **Vital signs should be reassessed every _____ minutes for a stable patient.**
- 15
 - 10
 - 5
 - 20
31. **What are the three ways to take blood pressure?**
- Sphygmomanometer, blood pressure monitor, and heart monitor
 - Palpation, auscultation, and blood pressure monitor
 - Sphygmomanometer, auscultation, and blood pressure monitor
 - Auscultation, palpation, and osculation
32. **Which of the following methods should the EMT attempt first when transporting a patient to the hospital?**
- Palpation
 - Auscultation
 - Blood pressure monitor
 - Any of the above
33. **To determine blood pressure, the EMT should position the cuff over the upper arm and place the stethoscope over the brachial artery. Next, she should inflate the cuff, then slowly deflate the cuff, listening for clicks or tapping sounds while remembering the number at the first sound. What is the next step in taking a blood pressure?**
- Dump all the pressure and record the number as the diastolic pressure.
 - Re-inflate the cuff on the patient's arm and repeat the process to verify the reading.
 - Continue releasing pressure until the clicks or tapping stop, and record both numbers. These are the blood pressure.
 - Remove the cuff from the patient's arm, place it on the opposite arm, and repeat the process to verify the reading.
34. **The abbreviation mmHg indicates that the blood pressure is measured by which of the following comparisons?**
- Minimum heart rate
 - Millimeters of mercury
 - Millimeters of water
 - Atmospheric pressure

Mod. 3 Vital Signs

35. **Your patient is warm, dry, and pink and denies shortness of breath. Which of the following should the EMT expect to find when evaluating the patient's oxygen saturation?**
- 91 percent
 - 98 percent
 - 102 percent
 - 95 percent
36. **An inaccurate oxygen saturation reading can result in all of the following EXCEPT:**
- carbon monoxide inhalation.
 - a patient that smokes cigarettes.
 - a patient wearing fingernail polish.
 - All of the above
37. **The EMT should reassess the vital signs of an unstable patient every _____ minutes.**
- 15
 - 10
 - 5
 - 2
38. **Upon assessment of your patient, you notice that he has cool, sweaty skin. This finding is best described as which of the following?**
- A diagnosis
 - A sign
 - A complaint
 - A symptom
39. **You respond to a 30-month-old patient who has passed out. Is the patient's blood pressure important to your treatment and why?**
- Yes, blood pressure must be taken on everyone because without it we cannot impact the patient's field management.
 - No, blood pressure taken on children younger than age 3 can cause damage to the tender tissues of the arm that could lead to hypertension in later life.
 - Yes, blood pressure can be taken on children because it is the only way we can understand the patient's condition.
 - No, blood pressure taken on children younger than age 3 is difficult and has little impact on the patient's field management.
40. **The device that some EMS services use as a light wave device to measure oxygen saturation (SpO₂) is called**
- capnography.
 - sphygmomanometer.
 - end tidal CO meter.
 - pulse oximeter.
41. **You have a 38-year-old who has fainted. Following your local protocol you use a light wave device to determine the SpO₂. As the EMT, you attach the device on the patient's finger, which gives you a reading of 91. What does that reading indicate?**
- Significant hypoxia
 - Severe hypoxia
 - Normal results
 - Hypoxia

Mod. 3 Vital Signs

42. **Recording and documenting your patient's first set of vital signs is very important because, when combined with reassessments, it allows you to do which of the following?**
- Make an accurate diagnosis of the patient's illness.
 - Compare your patient's condition with other patients' conditions.
 - Discover trends and changes in the patient's condition.
 - Fill in all of the blanks on the patient care report form.
43. **When taking blood pressure, the cuff should be inflated to what point?**
- 20 to 30 mmHg beyond the point where the pulse disappears
 - Until the patient says it hurts
 - Until the Velcro starts to crackle
 - Until the gauge reads 200 mmHg
44. **Your patient has a rapid, regular, and thready pulse. Which of the following is a possible cause of this finding?**
- Exertion
 - Shock
 - Fright
 - All of the above
45. **You respond to a high school football field on a hot, humid day to find a 16-year-old male complaining of dizziness and weakness after playing football for an hour. Which of the following would you expect his vital signs to be?**
- Normal pulse, blood pressure, and skin
 - Rapid pulse, high blood pressure, and hot, dry skin
 - Slow pulse, low blood pressure, and cool, dry skin
 - Rapid pulse, low blood pressure, and sweaty skin
46. **An approximate normal systolic blood pressure can be calculated for infants and children by using which of the following formulas?**
- 80 plus 2 times the age in years
 - 120 plus 2 times the age in years
 - 120 minus 2 times the age in years
 - 80 times 2 plus the age in years
47. **You respond to a childcare center for a report of an injured 4-year-old. Her pulse is 130 beats per minute. Which of the following BEST describes this finding?**
- Bradycardic
 - Normal for the child's age
 - Tachycardic
 - Unable to determine without knowing the family history
48. **Which of the following cause the pulse oximetry to give a false or incorrect reading?**
- A patient in shock or hyperthermia, carbon monoxide and certain poisonings, excessive movements
 - A patient in shock or hypothermia, carbon monoxide and certain poisonings, fingernail polish, excessive movements, poor batteries
 - A patient with rapid respirations, shock or hypothermia, carbon monoxide and certain poisonings, fingernail polish, excessive movements, poor batteries
 - A patient in shock or hypothermia, carbon monoxide and certain poisonings, excessive movements, good batteries
49. **You respond to a cafeteria to find an unconscious person with gurgling sounds upon exhalation and inhalation. What is the probable cause of the respiratory sounds?**
- Cardiac arrest
 - A complete airway obstruction
 - Fluids in the airway
 - The tongue blocking the airway

Mod. 3 Vital Signs

50. **The range of normal blood glucose level is from a low of 60 to 80 mg/dL to a high of:**
- 110 to 130.
 - 100 to 120.
 - 90 to 100.
 - 120 to 140.
51. **Which of the following is NOT a cause of unequal pupils?**
- Fright
 - An artificial eye
 - Stroke
 - Eye injury
52. **You respond to a nursing home to find an elderly patient with a pulse of 100, blood pressure of 100/60, respiratory rate of 12, and cool, pale skin. Which of the following describes this set of vital signs?**
- They are normal.
 - They indicate the patient is critically ill.
 - They will serve as a basis of comparison for later vital signs.
 - The patient is stable and will not require additional vital signs during transport.
53. **Your patient is in late stages of liver failure and has requested to be transported to the emergency department. You take your body substance isolation and move him to your cot and notice his skin is warm and dry with a yellow color. Your radio report to the hospital should state your patient is:**
- flushed.
 - mottled.
 - jaundiced.
 - cyanotic.
54. **How often should a patient's vital signs be reassessed during transport to the hospital after he has had his pulse restored with CPR and the use of an AED?**
- Every 10 minutes
 - Every 15 minutes
 - Every 2 minutes
 - Every 5 minutes
55. **An oxygen saturation of 97 percent is considered which of the following?**
- Severe hypoxia
 - Normal
 - Hypoxia
 - Significant hypoxia

Mod. 3 Vital Signs

Test Name: Mod 3 Vital Signs

1. d. Chief complaint
2. a. Baseline vital signs
3. c. Tachycardic
4. c. At secondary assessment
5. b. Radial
6. c. Pulse 40 and weak
7. c. Pulse, respiration, skin color, skin temperature and condition, pupils, and blood pressure
8. a. 12 breaths per minute
9. d. Shallow breathing
10. a. labored breathing.
11. d. snoring, gurgling, wheezing, and crowing.
12. a. mottled.
13. b. Blue-gray
14. b. Place the back of your hand against the patient's forehead.
15. b. accurate
16. a. 2 seconds
17. a. Suction the airway.
18. d. It can provide valuable information about the patient's circulation, a drop in perfusion, and if the blood vessels in the skin constrict, which could indicate a life-threatening problem.
19. d. Size, equality, and reactivity
20. c. Constriction
21. c. larger than normal.
22. b. systolic blood pressure.
23. c. Diastolic blood pressure
24. a. Covering two-thirds of the upper arm
25. d. Prehypertension
26. d. Any of the above
27. a. auscultation.
28. c. Systolic blood pressure; when the left ventricles contract and the blood is forced into the arteries
29. c. hypertension.
30. a. 15
31. b. Palpation, auscultation, and blood pressure monitor
32. b. Auscultation
33. c. Continue releasing pressure until the clicks or tapping stop, and record both numbers. These are the blood pressure.
34. b. Millimeters of mercury
35. b. 98 percent
36. d. All of the above
37. c. 5
38. b. A sign
39. d. No, blood pressure taken on children younger than age 3 is difficult and has little impact on the patient's field management.
40. d. pulse oximeter.
41. d. Hypoxia
42. c. Discover trends and changes in the patient's condition.
43. a. 20 to 30 mmHg beyond the point where the pulse disappears
44. b. Shock
45. d. Rapid pulse, low blood pressure, and sweaty skin
46. a. 80 plus 2 times the age in years
47. c. Tachycardic
48. b. A patient in shock or hypothermia, carbon monoxide and certain poisonings, fingernail polish, excessive movements, poor batteries
49. c. Fluids in the airway
50. d. 120 to 140.
51. a. Fright

Mod. 3 Vital Signs

- 52. c. They will serve as a basis of comparison for later vital signs.
- 53. c. jaundiced.
- 54. d. Every 5 minutes
- 55. b. Normal